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TO: Commissioner of Patents
 FAX NO.: 703-872-9326
 FROM: Eamon J. Wall
 DATE: October 28, 2003
 MATTER: Serial No. 737,841 Filed: December 14, 2000
 DOCKET NO.: DIVA/308
 APPLICANT: GORDON, et al

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☐ Petition
☐ Disclosure Statement & PTO-1449
☐ Priority Document
☐ Drawings (sheets) informal
☒ Response Under 37 CFR 1.116

☒ Transmittal Letter (copies)
☐ Fee Transmittal (2 copies)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/737,84	
	Filing Date	December 14, 2000	
	First Named Inventor	Gordon, et al.	
	Group Art Unit	3623	
	Examiner Name	Jeanty, R. main	
Total Number of Pages in This Submission	18	Attorney Docket Number	DIVA/301

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission (2)
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Firm or Individual name	Eamon J. Wall, Reg. No. 39,414	
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